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## APPLICANTS

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*M.*

\*\* CONTINUING DATA \*\*\*\*\* *Verifid AD*

FOREIGN APPLICATIONS \*\*\*\*\*  
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## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 12/20/2001

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no		
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>u</i> <i>40</i>		
Verified and Acknowledged	Examiner's Signature <i>u</i> Initials <i>40</i>		
STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
JAPAN	30	12	4

## ADDRESS

20350

## TITLE

Information providing system

FILING FEE RECEIVED 954	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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